UNITED STATES HOUSE OF REPRESENTATIVES	FORM B For New Members, Candidates, and New Employees	LEGISLATIVE RESOURCE OF
Name: Eliot - Rubin	Daytime Telephone	18 OCT 18 PM 1: 13
New Member of or Candidate for State: 1112 U.S. House of Representatives District: 12 Candidates – Date of Election:	Lyark City Check if Amendment	(Office Use Only)
New Officer or Employee Staff Fil Employing Office: Shared	Staff Filer Type (If Applicable): Shared Principal Assistant to	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in uneamed income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	gh the date of filing? Yes No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No Pr. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	arrangement with an Yes Ao the current calendar
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No J. Did you receive compensation of more than \$5,000 from single source in the current year and two prior years?	\$5,000 from a Yes No No
ATTACH THE CORR THIS FORM INCLUDES ONLY T	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER	<u>BO</u>	<u>rh</u> of these questions
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed. Fit child?	lave you excluded Yes No No
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ncome, or liabilities of a spouse or dependent child because they meet all three tests for tee on Ethics.	t all three tests for Yes No V

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	Sistar liker	, , , , , , , , , , , , , , , , , , ,	Cher	LAGInpros.	Examples:			For a detailed discussion of Schedule A requirements please refer to the instruction booklet.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.	If you report a privately-traded fund that is ar Excepted investment Fund, please check the "EIF box.	Exclude: Your personal residence, including second thomes and vacation homes (unless there was renta income during the reporting perior); and any firmitic interest in, or income derived from, a federa retirement program, including the Thrift Savings Plan	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real properly held for investment, provide a complete address or description, e.g., "rental properly," and a city and state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	the account that exceeds the reporting thresholds.	For all IRAs and other retirement plans (such 401(k) plans) provide the value for each asset held	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	production of income and with a fair market value exceeding \$1,000 at the and of the reporting period and (b) any other reportable asset or source of income which generated more than \$200 in 'unearned' income during the year.	<u>a</u>	Assets and/or Income Sources	-		SCHEDULE
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SCHEDULE D - LIABILITIES

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VOU. VOUI SDA	Name:
reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting	Eliot Paabiw
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unt owed during the reporting	Pageof

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

				DC, JT		
	Home	Care	Example			
	Mortgog -	CARE BANK	First Bank of Wilmington, DE	Creditor		
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- yelley grade	Homes southentony N. Y.		Mortgage on Rental Property, Dover, DE	Type of Liability		
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				Over \$50,000,000	د	
				Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude**: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

	•	more of store owner	Position
	little Appilo use Cold.	Potor Ellist, Women but Popa Gillet	Name of Organization

SCHEDU

date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of all or deferral of navments by a former or current employer other than the U.S. government or continuing participation in an employee	ULE F - AGREEMENTS Name: E//o
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bsence during the period of government service; e welfare or henefit plan maintained by a former	Pageof

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat Information listed on Schedule C.

g	The state of the s
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
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FILER NOTES (Optional)

Name: Page____of___

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KECARDING FINANCIAL DISCLOSURE REQUIREMENT CAMPAIGN NOTICE

If you have not yet raised (either through contributions or loans from yourself or others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below.

	Date: 17.02/16.07
	3100/Elft
	State: Now York Now Jest District: 12
	Name (Please Print or Type):
	70717
	withdrew from the race, you still must file a Financial Disclosure Statement with the House.
Withdrawat of Candidacy	[Note: If your Financial Disclosure Statement was due before the date on which you
	I withdrew my candidacy for the U.S. House of Representatives on
	This is to notify you that under the laws of the state of
	copy of which has been provided to me by the Clerk.
	the deadlines set out on pages 2 and 3 of the Financial Disclosure Instruction booklet, a
	Financial Disclosure Statement with the Clerk of the House of Representatives according to
Exceeded	I understand that when I do raise or spend in excess of \$5,000 for my campaign, I must file
Threshold Not	
Over \$5,000	Representatives.
	myself or others) or spent in excess of \$5,000 for my campaign for the UE. Hoffe
	Dear Madam Clerk: Solution of the state of
(Select One)	
Indicate Your Status:	
	135 Cannon House Office Building Washington, DC 20515-6601
	135 Cannon House Office Building
	Legislative Resource Center
	Office of the Clerk, U.S. House of Representatives
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(THIS PAGE WILL BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO: The Clerk, U.S. House of Representatives Legislative Resource Center 135 Cannon House Office Building Washington, DC 20515-6601

st Updated 10/2014